



**COUNTY OF SAN DIEGO
VOLUNTEER REPORT FORM
PERIOD JULY 1, 2012 - JUNE 30, 2013
Deadline: July 12, 2013**

COUNTY OF SAN DIEGO
BOARD OF SUPERVISORS
2013 JUL 12 PM 4 18
THOMAS J. PASTUSZKA
CLERK OF THE BOARD
OF SUPERVISORS

1. DEPARTMENT INFORMATION:

Department: Health & Human Services Agency
Division/Unit: Central Region

2. VOLUNTEER PROGRAM BENEFITS:

a. GENERAL VOLUNTEERS (this section should include community volunteer, student intern, groups, corporations, etc).

No. of Vol.	2 Hours	329	X	\$22.14	=	\$7,284.06
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Types of work performed by GENERAL VOLUNTEERS in this category:

Center City Job Description:

Assist in variety of clerical duties to include scanning documents into imaging system; assemble packets, write receipts, complete various logs and provide general office support to staff and customer service.

CWS Mills Job Description:

Assist in general clerical duties to include some reception coverage, ensure visitation room is cleaned, stocked and organized, provide general office support to program specialists, non confidential data entry, support coworker in transporting county vehicles for maintenance.

SouthEast FRC Job Description:

Clerical duties to include scanning documents, assembling client packetages, provide customer service, data entry, tracking logs and general office support to staff as needed.

b. INSTITUTIONAL VOLUNTEERS (this section should include honor camp inmates, PIC/RETC, GAIN, etc.)

No. of Vol.	0 Hours		X	\$22.14	=	\$0.00
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Types of work performed by INSTITUTIONAL VOLUNTEERS in this category:

c. SPECIALIZED VOLUNTEERS (this section should include utilization of Special Volunteers in positions requiring specific skills and/or expertise levels, for example, an attorney, physician, sports figure or celebrity). These specialized positions have verifiable compensation levels (VCL). If you have such a volunteer, please indicate the position, hours and compensation level

<u>Position</u>	<u>Hours</u>	X	<u>VCL</u>	=	<u>Dollar Benefit</u>
					\$0.00
					\$0.00
					\$0.00
					\$0.00
					\$0.00
					\$0.00
No. of Vol. 0 Total Hours 0 Total Value =					\$0.00

Types of work performed by SPECIALIZED VOLUNTEERS in this category:

d. TOTALS OF DEPARTMENT VOLUNTEERS (from above):

<u>No. of Volunteers</u>		<u>Hours</u>	<u>Dollar Benefit</u>
2a.	2	329	\$7,284.06
2b.			
2c.			
Total Vol.		2 Hours	329 Total Value =
			\$7,284.06

Please list all donations to the department's Volunteer program including monetary donations and tangible/intangible items. Items such as computers, air time, transportation, books, etc. Please assign a fair market value to each and add to the total value of the donations section.

Item Donated:	_____	Value:	_____
Item Donated:	_____	Value:	_____
Item Donated:	_____	Value:	_____
Item Donated:	_____	Value:	_____
Item Donated:	_____	Value:	_____

TOTAL VALUE =	\$0.00
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4. VOLUNTEER PROGRAM COSTS:

a. Cost of supervision of volunteers (total hours of direct supervision multiplied by the hourly rate of staff person (s) directly supervising program volunteers.)

Hours	50	X	Rate	\$19.59	=	\$979.50
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b. Cost of program coordination (total hours of program coordination multiplied the hourly rate of coordinator(s)). This section should include coordination of staff, compiling statistics, job description preparation, volunteer placement, recognition, etc.)

Hours	16	X	Rate	\$20.17	=	\$322.72
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c. Other program costs (volunteer training materials/supplies, recognition costs, etc.):

<u>Item</u>	<u>Cost</u>
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

TOTAL OF OTHER PROGRAM COSTS	=	\$0.00
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d. TOTAL OF VOLUNTEER PROGRAM COST (add 4a, 4b, and 4c)	=	\$1,302.22
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5. NET BENEFIT TO DEPARTMENT FROM VOLUNTEER PROGRAM:

a. Total Dollar Benefits of Volunteers, Item 2d (Page 2)	<u>\$7,284.06</u>
b. Total of Donations to Volunteer Program, Item 3 (Page 2)	<u>\$0.00</u>
c. Subtract Total of Program Costs, Item 4d (Page 3)	<u>\$1,302.22</u>

TOTAL PROGRAM BENEFIT

\$5,981.84

6. RECRUITING:

Please describe your recruiting programs:

Keep HHSA Website current and attend Way Program recruitment sessions.

7. SPECIAL VOLUNTEER PROGRAM ACTIVITIES/ACHIEVEMENTS:

Please describe any special activities and/or achievements your program was involved in during the period of this report:

N/A

8. VOLUNTEER PROGRAM GOALS FOR FISCAL YEAR 2013-14:

Please describe your program goals. Include activities, number of volunteers, recruitment, training, recognition and other goals:


Ensure other departmental volunteer coordinators are aware of Central Region programs and services - share how a volunteer can support operational needs.

Attend Quarterly Volunteer Coordinator meetings.

9. GENERAL INFORMATION:

Name of person completing report:	<u>Diane Reinert</u>		
Phone: <u>619-338-2720</u>	Mail Stop: <u>W-408</u>	E-Mail:	<u>Diane.Reinert@sdcounty</u>
Volunteer Coordinator:	<u>Diane Reinert</u>		
Phone: <u>619-338-2720</u>	Mail Stop: <u>W-408</u>	E-Mail:	<u>Diane.Reinert@sdcounty</u>

10. DEPARTMENT CERTIFICATION:

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DEPARTMENT HEAD SIGNATURE
Barbara Jiménez, Deputy Director

7/10/2013
DATE